

**REISSUE
PATENT APPLICATION
TRANSMITTAL**

Attorney Docket No.	245084US0RE
First Named Inventor	Hirotoishi ISHIDA, et al.
Original Patent Number	6,372,278
Original Patent Issue Date	April 16, 2002
Title	SWEETENER COMPOSITION

17518 U.S. PTO
10/722678

APPLICATION FOR REISSUE OF: ☒ Utility Patent ☐ Design Patent ☐ Plant Patent

APPLICATION ELEMENTS

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
Alexandria, Virginia 22313

1. ☒ Fee Transmittal Form
(Submit an original and a duplicate for fee processing)

2. ☒ Specification and claims

3. ☒ Drawing(s)

4. ☐ Reissue Oath or Declaration

5. Original U.S. Patent

☐ Offer to surrender original patent

or ☐ Ribboned Original Patent Grant

☐ Affidavit / Declaration of Loss

6. Original U.S. Patent currently assigned?

☒ Yes ☐ No

if yes, check applicable boxes

☐ Written Consent of all Assignees

☐ 37 C.F.R. §3.73(b) Statement

☐ Power of Attorney

ACCOMPANYING APPLICATION PARTS

7. ☒ Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c).

8. ☐ Foreign Priority Claim (35 U.S.C. 119)

9. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations

10. ☐ English Translation of Reissue Oath/Declaration

11. ☐ Applicant claims small entity status. See 37 CFR 1.27.

12. ☒ Preliminary Amendment

13. ☒ White Advance Serial No. Postcard

14. ☒ Other: Application Data Sheet (4 pp.)
Request for Priority

15. CORRESPONDENCE ADDRESS

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Registration No.: 32,884

Signature:

Date:

Nov. 20, 2003

Name:

Registration No.:

REISSUE APPLICATION FEE TRANSMITTAL FORM					Docket Number 245084US0RE	
Claims as filed - Part 1						
Claims in Original Patent	For	Number Filed in Reissue Application	Number Extra	Rate		Fee
16	Total Claims	16	0	x	\$18 =	\$0.00
5	Independent	5	0	x	\$86 =	\$0.00
Basic Fee (37 CFR 1.16(h))						\$770.00
<input checked="" type="checkbox"/> Late Filing of Declaration						\$130.00
Total of above calculations						\$900.00
<input type="checkbox"/> Reduction by 50% for filing by small entity						\$0.00
Total Filing Fee						\$900.00

☐ Please charge Deposit Account No. 15-0030 in the amount of _____. A duplicate copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

☐ A check in the amount of _____ to cover the filing/additional fee is enclosed.

☒ Credit card payment form is attached to cover the filing/additional fee in the amount of \$900.00

November 28, 2003
Date


Signature of Applicant, Attorney or Agent of Record

Stephen G. Baxter, Ph.D., Registration No. 32,884
Typed or printed name